



Sen. Rachelle Crowe

Filed: 3/26/2021

10200SB1919sam001

LRB102 17284 KTG 24222 a

1 AMENDMENT TO SENATE BILL 1919

2 AMENDMENT NO. _____. Amend Senate Bill 1919 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Adult Protective Services Act is amended
5 by changing Sections 2, 3, 3.5, 4, 4.1, 4.2, 5, 7.1, 7.5, 8, 9,
6 13, and 15 and by adding Sections 3.3 and 3.6 as follows:

7 (320 ILCS 20/2) (from Ch. 23, par. 6602)

8 Sec. 2. Definitions. As used in this Act, unless the
9 context requires otherwise:

10 (a) "Abandonment" means the desertion or willful forsaking
11 of an eligible adult by anyone having care or custody of that
12 eligible adult under circumstances in which a reasonable
13 person would continue to provide care and custody.

14 (a-1) ~~(a)~~ "Abuse" means causing any physical, mental or
15 sexual injury to an eligible adult, including exploitation of
16 such adult's financial resources, and abandonment.

1 Nothing in this Act shall be construed to mean that an
2 eligible adult is a victim of abuse, abandonment, neglect, or
3 self-neglect for the sole reason that he or she is being
4 furnished with or relies upon treatment by spiritual means
5 through prayer alone, in accordance with the tenets and
6 practices of a recognized church or religious denomination.

7 Nothing in this Act shall be construed to mean that an
8 eligible adult is a victim of abuse because of health care
9 services provided or not provided by licensed health care
10 professionals.

11 (a-5) "Abuser" means a person who abuses, abandons,
12 neglects, or financially exploits an eligible adult.

13 (a-6) "Adult with disabilities" means a person aged 18
14 through 59 who resides in a domestic living situation and
15 whose disability as defined in subsection (c-5) impairs his or
16 her ability to seek or obtain protection from abuse,
17 abandonment, neglect, or exploitation.

18 (a-7) "Caregiver" means a person who either as a result of
19 a family relationship, voluntarily, or in exchange for
20 compensation has assumed responsibility for all or a portion
21 of the care of an eligible adult who needs assistance with
22 activities of daily living or instrumental activities of daily
23 living.

24 (b) "Department" means the Department on Aging of the
25 State of Illinois.

26 (c) "Director" means the Director of the Department.

1 (c-5) "Disability" means a physical or mental disability,
2 including, but not limited to, a developmental disability, an
3 intellectual disability, a mental illness as defined under the
4 Mental Health and Developmental Disabilities Code, or dementia
5 as defined under the Alzheimer's Disease Assistance Act.

6 (d) "Domestic living situation" means a residence where
7 the eligible adult at the time of the report lives alone or
8 with his or her family or a caregiver, or others, or other
9 community-based unlicensed facility, but is not:

10 (1) A licensed facility as defined in Section 1-113 of
11 the Nursing Home Care Act;

12 (1.5) A facility licensed under the ID/DD Community
13 Care Act;

14 (1.6) A facility licensed under the MC/DD Act;

15 (1.7) A facility licensed under the Specialized Mental
16 Health Rehabilitation Act of 2013;

17 (2) A "life care facility" as defined in the Life Care
18 Facilities Act;

19 (3) A home, institution, or other place operated by
20 the federal government or agency thereof or by the State
21 of Illinois;

22 (4) A hospital, sanitarium, or other institution, the
23 principal activity or business of which is the diagnosis,
24 care, and treatment of human illness through the
25 maintenance and operation of organized facilities
26 therefor, which is required to be licensed under the

1 Hospital Licensing Act;

2 (5) A "community living facility" as defined in the
3 Community Living Facilities Licensing Act;

4 (6) (Blank);

5 (7) A "community-integrated living arrangement" as
6 defined in the Community-Integrated Living Arrangements
7 Licensure and Certification Act or a "community
8 residential alternative" as licensed under that Act;

9 (8) An assisted living or shared housing establishment
10 as defined in the Assisted Living and Shared Housing Act;
11 or

12 (9) A supportive living facility as described in
13 Section 5-5.01a of the Illinois Public Aid Code.

14 (e) "Eligible adult" means either an adult with
15 disabilities aged 18 through 59 or a person aged 60 or older
16 who resides in a domestic living situation and is, or is
17 alleged to be, abused, abandoned, neglected, or financially
18 exploited by another individual or who neglects himself or
19 herself. "Eligible adult" also includes an adult who resides
20 in any of the facilities that are excluded from the definition
21 of "domestic living situation" under paragraphs (1) through
22 (9) of subsection (d), if either: (i) the alleged abuse, abandonment, or neglect occurs outside of the facility and not
23 under facility supervision and the alleged abuser is a family
24 member, caregiver, or another person who has a continuing
25 relationship with the adult; or (ii) the alleged financial
26

1 exploitation is perpetrated by a family member, caregiver, or
2 another person who has a continuing relationship with the
3 adult, but who is not an employee of the facility where the
4 adult resides.

5 (f) "Emergency" means a situation in which an eligible
6 adult is living in conditions presenting a risk of death or
7 physical, mental or sexual injury and the provider agency has
8 reason to believe the eligible adult is unable to consent to
9 services which would alleviate that risk.

10 (f-1) "Financial exploitation" means the use of an
11 eligible adult's resources by another to the disadvantage of
12 that adult or the profit or advantage of a person other than
13 that adult.

14 (f-5) "Mandated reporter" means any of the following
15 persons while engaged in carrying out their professional
16 duties:

17 (1) a professional or professional's delegate while
18 engaged in: (i) social services, (ii) law enforcement,
19 (iii) education, (iv) the care of an eligible adult or
20 eligible adults, or (v) any of the occupations required to
21 be licensed under the Clinical Psychologist Licensing Act,
22 the Clinical Social Work and Social Work Practice Act, the
23 Illinois Dental Practice Act, the Dietitian Nutritionist
24 Practice Act, the Marriage and Family Therapy Licensing
25 Act, the Medical Practice Act of 1987, the Naprapathic
26 Practice Act, the Nurse Practice Act, the Nursing Home

1 Administrators Licensing and Disciplinary Act, the
2 Illinois Occupational Therapy Practice Act, the Illinois
3 Optometric Practice Act of 1987, the Pharmacy Practice
4 Act, the Illinois Physical Therapy Act, the Physician
5 Assistant Practice Act of 1987, the Podiatric Medical
6 Practice Act of 1987, the Respiratory Care Practice Act,
7 the Professional Counselor and Clinical Professional
8 Counselor Licensing and Practice Act, the Illinois
9 Speech-Language Pathology and Audiology Practice Act, the
10 Veterinary Medicine and Surgery Practice Act of 2004, and
11 the Illinois Public Accounting Act;

12 (1.5) an employee of an entity providing developmental
13 disabilities services or service coordination funded by
14 the Department of Human Services;

15 (2) an employee of a vocational rehabilitation
16 facility prescribed or supervised by the Department of
17 Human Services;

18 (3) an administrator, employee, or person providing
19 services in or through an unlicensed community based
20 facility;

21 (4) any religious practitioner who provides treatment
22 by prayer or spiritual means alone in accordance with the
23 tenets and practices of a recognized church or religious
24 denomination, except as to information received in any
25 confession or sacred communication enjoined by the
26 discipline of the religious denomination to be held

1 confidential;

2 (5) field personnel of the Department of Healthcare
3 and Family Services, Department of Public Health, and
4 Department of Human Services, and any county or municipal
5 health department;

6 (6) personnel of the Department of Human Services, the
7 Guardianship and Advocacy Commission, the State Fire
8 Marshal, local fire departments, the Department on Aging
9 and its subsidiary Area Agencies on Aging and provider
10 agencies, and the Office of State Long Term Care
11 Ombudsman;

12 (7) any employee of the State of Illinois not
13 otherwise specified herein who is involved in providing
14 services to eligible adults, including professionals
15 providing medical or rehabilitation services and all other
16 persons having direct contact with eligible adults;

17 (8) a person who performs the duties of a coroner or
18 medical examiner; or

19 (9) a person who performs the duties of a paramedic or
20 an emergency medical technician.

21 (g) "Neglect" means another individual's failure to
22 provide an eligible adult with or willful withholding from an
23 eligible adult the necessities of life including, but not
24 limited to, food, clothing, shelter or health care. This
25 subsection does not create any new affirmative duty to provide
26 support to eligible adults. Nothing in this Act shall be

1 construed to mean that an eligible adult is a victim of neglect
2 because of health care services provided or not provided by
3 licensed health care professionals.

4 (h) "Provider agency" means any public or nonprofit agency
5 in a planning and service area that is selected by the
6 Department or appointed by the regional administrative agency
7 with prior approval by the Department on Aging to receive and
8 assess reports of alleged or suspected abuse, abandonment,
9 neglect, or financial exploitation. A provider agency is also
10 referenced as a "designated agency" in this Act.

11 (i) "Regional administrative agency" means any public or
12 nonprofit agency in a planning and service area that provides
13 regional oversight and performs functions as set forth in
14 subsection (b) of Section 3 of this Act. The Department shall
15 designate an Area Agency on Aging as the regional
16 administrative agency or, in the event the Area Agency on
17 Aging in that planning and service area is deemed by the
18 Department to be unwilling or unable to provide those
19 functions, the Department may serve as the regional
20 administrative agency or designate another qualified entity to
21 serve as the regional administrative agency; any such
22 designation shall be subject to terms set forth by the
23 Department.

24 (i-5) "Self-neglect" means a condition that is the result
25 of an eligible adult's inability, due to physical or mental
26 impairments, or both, or a diminished capacity, to perform

1 essential self-care tasks that substantially threaten his or
2 her own health, including: providing essential food, clothing,
3 shelter, and health care; and obtaining goods and services
4 necessary to maintain physical health, mental health,
5 emotional well-being, and general safety. The term includes
6 compulsive hoarding, which is characterized by the acquisition
7 and retention of large quantities of items and materials that
8 produce an extensively cluttered living space, which
9 significantly impairs the performance of essential self-care
10 tasks or otherwise substantially threatens life or safety.

11 (j) "Substantiated case" means a reported case of alleged
12 or suspected abuse, abandonment, neglect, financial
13 exploitation, or self-neglect in which a provider agency,
14 after assessment, determines that there is reason to believe
15 abuse, abandonment, neglect, or financial exploitation has
16 occurred.

17 (k) "Verified" means a determination that there is "clear
18 and convincing evidence" that the specific injury or harm
19 alleged was the result of abuse, abandonment, neglect, or
20 financial exploitation.

21 (Source: P.A. 99-180, eff. 7-29-15; 100-641, eff. 1-1-19.)

22 (320 ILCS 20/3) (from Ch. 23, par. 6603)

23 Sec. 3. Responsibilities.

24 (a) The Department shall establish, design, and manage a
25 protective services program for eligible adults who have been,

1 or are alleged to be, victims of abuse, abandonment, neglect,
2 financial exploitation, or self-neglect. The Department shall
3 contract with or fund, or contract with and fund, regional
4 administrative agencies, provider agencies, or both, for the
5 provision of those functions, and, contingent on adequate
6 funding, with attorneys or legal services provider agencies
7 for the provision of legal assistance pursuant to this Act.
8 For self-neglect, the program shall include the following
9 services for eligible adults who have been removed from their
10 residences for the purpose of cleanup or repairs: temporary
11 housing; counseling; and caseworker services to try to ensure
12 that the conditions necessitating the removal do not reoccur.

13 (a-1) The Department shall by rule develop standards for
14 minimum staffing levels and staff qualifications. The
15 Department shall by rule establish mandatory standards for the
16 investigation of abuse, abandonment, neglect, financial
17 exploitation, or self-neglect of eligible adults and mandatory
18 procedures for linking eligible adults to appropriate services
19 and supports.

20 (a-5) A provider agency shall, in accordance with rules
21 promulgated by the Department, establish a multi-disciplinary
22 team to act in an advisory role for the purpose of providing
23 professional knowledge and expertise in the handling of
24 complex abuse cases involving eligible adults. Each
25 multi-disciplinary team shall consist of one volunteer
26 representative from the following professions: banking or

1 finance; disability care; health care; law; law enforcement;
2 mental health care; and clergy. A provider agency may also
3 choose to add representatives from the fields of substance
4 abuse, domestic violence, sexual assault, or other related
5 fields. To support multi-disciplinary teams in this role, law
6 enforcement agencies and coroners or medical examiners shall
7 supply records as may be requested in particular cases.

8 (b) Each regional administrative agency shall designate
9 provider agencies within its planning and service area with
10 prior approval by the Department on Aging, monitor the use of
11 services, provide technical assistance to the provider
12 agencies and be involved in program development activities.

13 (c) Provider agencies shall assist, to the extent
14 possible, eligible adults who need agency services to allow
15 them to continue to function independently. Such assistance
16 shall include, but not be limited to, receiving reports of
17 alleged or suspected abuse, abandonment, neglect, financial
18 exploitation, or self-neglect, conducting face-to-face
19 assessments of such reported cases, determination of
20 substantiated cases, referral of substantiated cases for
21 necessary support services, referral of criminal conduct to
22 law enforcement in accordance with Department guidelines, and
23 provision of case work and follow-up services on substantiated
24 cases. In the case of a report of alleged or suspected abuse, abandonment, or neglect that places an eligible adult at risk
25 of injury or death, a provider agency shall respond to the
26

1 report on an emergency basis in accordance with guidelines
2 established by the Department by administrative rule and shall
3 ensure that it is capable of responding to such a report 24
4 hours per day, 7 days per week. A provider agency may use an
5 on-call system to respond to reports of alleged or suspected
6 abuse, abandonment, or neglect after hours and on weekends.

7 (c-5) Where a provider agency has reason to believe that
8 the death of an eligible adult may be the result of abuse, abandonment,
9 or neglect, including any reports made after
10 death, the agency shall immediately report the matter to both
11 the appropriate law enforcement agency and the coroner or
12 medical examiner. Between 30 and 45 days after making such a
13 report, the provider agency again shall contact the law
14 enforcement agency and coroner or medical examiner to
15 determine whether any further action was taken. Upon request
16 by a provider agency, a law enforcement agency and coroner or
17 medical examiner shall supply a summary of its action in
18 response to a reported death of an eligible adult. A copy of
19 the report shall be maintained and all subsequent follow-up
20 with the law enforcement agency and coroner or medical
21 examiner shall be documented in the case record of the
22 eligible adult. If the law enforcement agency, coroner, or
23 medical examiner determines the reported death was caused by
24 abuse, abandonment, or neglect by a caregiver, the law
25 enforcement agency, coroner, or medical examiner shall inform
26 the Department, and the Department shall report the

1 caregiver's identity on the Registry as described in Section
2 7.5 of this Act.

3 (d) Upon sufficient appropriations to implement a
4 statewide program, the Department shall implement a program,
5 based on the recommendations of the Self-Neglect Steering
6 Committee, for (i) responding to reports of possible
7 self-neglect, (ii) protecting the autonomy, rights, privacy,
8 and privileges of adults during investigations of possible
9 self-neglect and consequential judicial proceedings regarding
10 competency, (iii) collecting and sharing relevant information
11 and data among the Department, provider agencies, regional
12 administrative agencies, and relevant seniors, (iv) developing
13 working agreements between provider agencies and law
14 enforcement, where practicable, and (v) developing procedures
15 for collecting data regarding incidents of self-neglect.

16 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14.)

17 (320 ILCS 20/3.3 new)

18 Sec. 3.3. Adult protective services trauma-informed
19 training.

20 (a) This Section applies to any employee in the Office of
21 Adult Protective Services who works on the development and
22 implementation of social services to respond to and prevent
23 adult abuse, neglect, exploitation, or abandonment.

24 (b) Subject to appropriation, the Department shall offer
25 an annual trauma-informed training program that includes (i)

1 instruction on how trauma impacts caseworkers and other
2 employees who respond to and prevent adult abuse, neglect,
3 exploitation, or abandonment, (ii) a review of the meaning and
4 impact of secondary trauma, and (iii) information about
5 strategies to identify and address secondary trauma in
6 caseworkers and other employees who work with adults who may
7 have experienced abuse, neglect, exploitation, or abandonment.

8 (c) Any trauma-informed training offered by the Department
9 shall cover the following:

10 (1) The widespread impact of secondary trauma on
11 caseworkers and other employees who work with adults who
12 may have experienced abuse, neglect, exploitation, or
13 abandonment.

14 (2) An understanding of who is at risk for developing
15 secondary trauma.

16 (3) Relevant and realistic case studies involving
17 traumatic situations that other caseworkers and employees
18 who work with adults who may have experienced abuse,
19 neglect, exploitation, or abandonment have encountered in
20 their work.

21 (4) Symptoms and causes of secondary trauma in
22 caseworkers and other employees who work with adults who
23 may have experienced abuse, neglect, exploitation, or
24 abandonment.

25 (5) Strategies for prevention and intervention in
26 cases of secondary trauma involving caseworkers or other

1 employees who work with adults who may have experienced
2 abuse, neglect, exploitation, or abandonment, including
3 the development of a self-care plan.

4 (6) How to incorporate monitoring and support
5 techniques for employees experiencing secondary trauma
6 into departmental policies, guidelines, and protocols.

7 (d) This Section is designed to address gaps in current
8 trauma-informed training requirements for employees of the
9 Office of Adult Protective Services and to improve the quality
10 of training. If any law or rule existing on the effective date
11 of this amendatory Act of the 102nd General Assembly contains
12 more rigorous training requirements for employees of the
13 Office of Adult Protective Services, then that law or rule
14 shall apply. If there is overlap between this Section and
15 other laws and rules, the Department shall interpret this
16 Section to avoid duplication of requirements while ensuring
17 that the minimum requirements set in this Section are met.

18 (e) The Department may adopt rules to implement this
19 Section.

20 (320 ILCS 20/3.5)

21 Sec. 3.5. Other responsibilities. The Department shall
22 also be responsible for the following activities, contingent
23 upon adequate funding; implementation shall be expanded to
24 adults with disabilities upon the effective date of this
25 amendatory Act of the 98th General Assembly, except those

1 responsibilities under subsection (a), which shall be
2 undertaken as soon as practicable:

3 (a) promotion of a wide range of endeavors for the
4 purpose of preventing abuse, abandonment, neglect,
5 financial exploitation, and self-neglect, including, but
6 not limited to, promotion of public and professional
7 education to increase awareness of abuse, abandonment,
8 neglect, financial exploitation, and self-neglect; to
9 increase reports; to establish access to and use of the
10 Registry established under Section 7.5; and to improve
11 response by various legal, financial, social, and health
12 systems;

13 (b) coordination of efforts with other agencies,
14 councils, and like entities, to include but not be limited
15 to, the Administrative Office of the Illinois Courts, the
16 Office of the Attorney General, the State Police, the
17 Illinois Law Enforcement Training Standards Board, the
18 State Triad, the Illinois Criminal Justice Information
19 Authority, the Departments of Public Health, Healthcare
20 and Family Services, and Human Services, the Illinois
21 Guardianship and Advocacy Commission, the Family Violence
22 Coordinating Council, the Illinois Violence Prevention
23 Authority, and other entities which may impact awareness
24 of, and response to, abuse, abandonment, neglect,
25 financial exploitation, and self-neglect;

26 (c) collection and analysis of data;

1 (d) monitoring of the performance of regional
2 administrative agencies and adult protective services
3 agencies;

4 (e) promotion of prevention activities;

5 (f) establishing and coordinating an aggressive
6 training program on the unique nature of adult abuse cases
7 with other agencies, councils, and like entities, to
8 include but not be limited to the Office of the Attorney
9 General, the State Police, the Illinois Law Enforcement
10 Training Standards Board, the State Triad, the Illinois
11 Criminal Justice Information Authority, the State
12 Departments of Public Health, Healthcare and Family
13 Services, and Human Services, the Family Violence
14 Coordinating Council, the Illinois Violence Prevention
15 Authority, the agency designated by the Governor under
16 Section 1 of the Protection and Advocacy for Persons with
17 Developmental Disabilities Act, and other entities that
18 may impact awareness of and response to abuse,
19 abandonment, neglect, financial exploitation, and
20 self-neglect;

21 (g) solicitation of financial institutions for the
22 purpose of making information available to the general
23 public warning of financial exploitation of adults and
24 related financial fraud or abuse, including such
25 information and warnings available through signage or
26 other written materials provided by the Department on the

1 premises of such financial institutions, provided that the
2 manner of displaying or distributing such information is
3 subject to the sole discretion of each financial
4 institution;

5 (g-1) developing by joint rulemaking with the
6 Department of Financial and Professional Regulation
7 minimum training standards which shall be used by
8 financial institutions for their current and new employees
9 with direct customer contact; the Department of Financial
10 and Professional Regulation shall retain sole visitation
11 and enforcement authority under this subsection (g-1); the
12 Department of Financial and Professional Regulation shall
13 provide bi-annual reports to the Department setting forth
14 aggregate statistics on the training programs required
15 under this subsection (g-1); and

16 (h) coordinating efforts with utility and electric
17 companies to send notices in utility bills to explain to
18 persons 60 years of age or older their rights regarding
19 telemarketing and home repair fraud.

20 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;
21 99-143, eff. 7-27-15.)

22 (320 ILCS 20/3.6 new)

23 Sec. 3.6. Elder abuse risk assessment tool.

24 (a) The Department shall develop and implement a
25 demonstration project to allow for the use of a risk

1 assessment tool to assist in identifying elderly persons,
2 including homebound persons, who may be experiencing elder
3 abuse, abandonment, neglect, or exploitation and providing the
4 necessary support to address elder abuse, abandonment,
5 neglect, or exploitation. The Department shall finalize
6 planning on the demonstration project by December 1, 2022 with
7 implementation beginning on January 1, 2023. The risk
8 assessment tool shall identify (i) the level of risk for elder
9 abuse, abandonment, neglect, or exploitation; (ii) risk
10 factors causing the abuse, abandonment, neglect, or
11 exploitation; and (iii) appropriate follow-up and action in
12 response to any suspected abuse, abandonment, neglect, or
13 exploitation. In identifying a risk assessment tool, the
14 Department shall coordinate with all of the following:

15 (1) The Department of Healthcare and Family Services.

16 (2) A hospital, hospital system, or a statewide
17 association representing hospitals.

18 (3) A managed care organization or a statewide
19 association representing managed care organizations.

20 (4) A Care Coordination Unit.

21 (5) An Area Agency on Aging or a statewide association
22 representing Area Agencies on Aging.

23 (6) Legal aid providers.

24 (7) A financial institution or a statewide association
25 representing financial institutions.

26 (8) Adult Protective Services providers.

1 (b) The risk assessment tool shall be comprehensive and
2 include all of the following components:

3 (1) Client demographics.

4 (2) Indicators of elder abuse, abandonment, neglect,
5 or exploitation.

6 (3) Contributing risk factors for abuse, abandonment,
7 neglect, or exploitation.

8 (4) Overall level of risk on a scale of low, medium,
9 and high-risk level.

10 (5) Appropriate follow-up and action.

11 (6) Client outcomes.

12 (c) If any hospital employee, social worker, or other
13 employee utilizing the risk assessment tool identifies that an
14 elderly person is at risk for elder abuse, abandonment,
15 neglect, or exploitation, the employee shall utilize the risk
16 assessment tool to refer the elderly person to a managed care
17 organization, legal aid service, Adult Protective Services
18 provider, or other needed services and supports.

19 (d) The Department may adopt rules to implement this
20 Section.

21 (320 ILCS 20/4) (from Ch. 23, par. 6604)

22 Sec. 4. Reports of abuse, abandonment, or neglect.

23 (a) Any person who suspects the abuse, abandonment,
24 neglect, financial exploitation, or self-neglect of an
25 eligible adult may report this suspicion to an agency

1 designated to receive such reports under this Act or to the
2 Department.

3 (a-5) If any mandated reporter has reason to believe that
4 an eligible adult, who because of a disability or other
5 condition or impairment is unable to seek assistance for
6 himself or herself, has, within the previous 12 months, been
7 subjected to abuse, abandonment, neglect, or financial
8 exploitation, the mandated reporter shall, within 24 hours
9 after developing such belief, report this suspicion to an
10 agency designated to receive such reports under this Act or to
11 the Department. The agency designated to receive such reports
12 under this Act or the Department may establish a manner in
13 which a mandated reporter can make the required report through
14 an Internet reporting tool. Information sent and received
15 through the Internet reporting tool is subject to the same
16 rules in this Act as other types of confidential reporting
17 established by the designated agency or the Department.
18 Whenever a mandated reporter is required to report under this
19 Act in his or her capacity as a member of the staff of a
20 medical or other public or private institution, facility, or
21 agency, he or she shall make a report to an agency designated
22 to receive such reports under this Act or to the Department in
23 accordance with the provisions of this Act and may also notify
24 the person in charge of the institution, facility, or agency
25 or his or her designated agent that the report has been made.
26 Under no circumstances shall any person in charge of such

1 institution, facility, or agency, or his or her designated
2 agent to whom the notification has been made, exercise any
3 control, restraint, modification, or other change in the
4 report or the forwarding of the report to an agency designated
5 to receive such reports under this Act or to the Department.
6 The privileged quality of communication between any
7 professional person required to report and his or her patient
8 or client shall not apply to situations involving abused,
9 abandoned, neglected, or financially exploited eligible adults
10 and shall not constitute grounds for failure to report as
11 required by this Act.

12 (a-7) A person making a report under this Act in the belief
13 that it is in the alleged victim's best interest shall be
14 immune from criminal or civil liability or professional
15 disciplinary action on account of making the report,
16 notwithstanding any requirements concerning the
17 confidentiality of information with respect to such eligible
18 adult which might otherwise be applicable.

19 (a-9) Law enforcement officers shall continue to report
20 incidents of alleged abuse pursuant to the Illinois Domestic
21 Violence Act of 1986, notwithstanding any requirements under
22 this Act.

23 (b) Any person, institution or agency participating in the
24 making of a report, providing information or records related
25 to a report, assessment, or services, or participating in the
26 investigation of a report under this Act in good faith, or

1 taking photographs or x-rays as a result of an authorized
2 assessment, shall have immunity from any civil, criminal or
3 other liability in any civil, criminal or other proceeding
4 brought in consequence of making such report or assessment or
5 on account of submitting or otherwise disclosing such
6 photographs or x-rays to any agency designated to receive
7 reports of alleged or suspected abuse, abandonment, or
8 neglect. Any person, institution or agency authorized by the
9 Department to provide assessment, intervention, or
10 administrative services under this Act shall, in the good
11 faith performance of those services, have immunity from any
12 civil, criminal or other liability in any civil, criminal, or
13 other proceeding brought as a consequence of the performance
14 of those services. For the purposes of any civil, criminal, or
15 other proceeding, the good faith of any person required to
16 report, permitted to report, or participating in an
17 investigation of a report of alleged or suspected abuse,
18 abandonment, neglect, financial exploitation, or self-neglect
19 shall be presumed.

20 (c) The identity of a person making a report of alleged or
21 suspected abuse, abandonment, neglect, financial exploitation,
22 or self-neglect under this Act may be disclosed by the
23 Department or other agency provided for in this Act only with
24 such person's written consent or by court order, but is
25 otherwise confidential.

26 (d) The Department shall by rule establish a system for

1 filing and compiling reports made under this Act.

2 (e) Any physician who willfully fails to report as
3 required by this Act shall be referred to the Illinois State
4 Medical Disciplinary Board for action in accordance with
5 subdivision (A) (22) of Section 22 of the Medical Practice Act
6 of 1987. Any dentist or dental hygienist who willfully fails
7 to report as required by this Act shall be referred to the
8 Department of Professional Regulation for action in accordance
9 with paragraph 19 of Section 23 of the Illinois Dental
10 Practice Act. Any optometrist who willfully fails to report as
11 required by this Act shall be referred to the Department of
12 Financial and Professional Regulation for action in accordance
13 with paragraph (15) of subsection (a) of Section 24 of the
14 Illinois Optometric Practice Act of 1987. Any other mandated
15 reporter required by this Act to report suspected abuse,
16 abandonment, neglect, or financial exploitation who willfully
17 fails to report the same is guilty of a Class A misdemeanor.

18 (Source: P.A. 97-860, eff. 7-30-12; 98-49, eff. 7-1-13;
19 98-1039, eff. 8-25-14.)

20 (320 ILCS 20/4.1)

21 Sec. 4.1. Employer discrimination. No employer shall
22 discharge, demote or suspend, or threaten to discharge, demote
23 or suspend, or in any manner discriminate against any employee
24 who makes any good faith oral or written report of suspected
25 abuse, abandonment, neglect, or financial exploitation or who

1 is or will be a witness or testify in any investigation or
2 proceeding concerning a report of suspected abuse,
3 abandonment, neglect, or financial exploitation.

4 (Source: P.A. 98-49, eff. 7-1-13.)

5 (320 ILCS 20/4.2)

6 Sec. 4.2. Testimony by mandated reporter and investigator.

7 Any mandated reporter who makes a report or any person who
8 investigates a report under this Act shall testify fully in
9 any judicial proceeding resulting from such report, as to any
10 evidence of abuse, abandonment, neglect, or financial
11 exploitation or the cause thereof. Any mandated reporter who
12 is required to report a suspected case of abuse, abandonment,
13 neglect, or financial exploitation under Section 4 of this Act
14 shall testify fully in any administrative hearing resulting
15 from such report, as to any evidence of abuse, abandonment,
16 neglect, or financial exploitation or the cause thereof. No
17 evidence shall be excluded by reason of any common law or
18 statutory privilege relating to communications between the
19 alleged abuser or the eligible adult subject of the report
20 under this Act and the person making or investigating the
21 report.

22 (Source: P.A. 90-628, eff. 1-1-99.)

23 (320 ILCS 20/5) (from Ch. 23, par. 6605)

24 Sec. 5. Procedure.

1 (a) A provider agency designated to receive reports of
2 alleged or suspected abuse, abandonment, neglect, financial
3 exploitation, or self-neglect under this Act shall, upon
4 receiving such a report, conduct a face-to-face assessment
5 with respect to such report, in accord with established law
6 and Department protocols, procedures, and policies.
7 Face-to-face assessments, casework, and follow-up of reports
8 of self-neglect by the provider agencies designated to receive
9 reports of self-neglect shall be subject to sufficient
10 appropriation for statewide implementation of assessments,
11 casework, and follow-up of reports of self-neglect. In the
12 absence of sufficient appropriation for statewide
13 implementation of assessments, casework, and follow-up of
14 reports of self-neglect, the designated adult protective
15 services provider agency shall refer all reports of
16 self-neglect to the appropriate agency or agencies as
17 designated by the Department for any follow-up. The assessment
18 shall include, but not be limited to, a visit to the residence
19 of the eligible adult who is the subject of the report and
20 shall include interviews or consultations regarding the
21 allegations with service agencies, immediate family members,
22 and individuals who may have knowledge of the eligible adult's
23 circumstances based on the consent of the eligible adult in
24 all instances, except where the provider agency is acting in
25 the best interest of an eligible adult who is unable to seek
26 assistance for himself or herself and where there are

1 allegations against a caregiver who has assumed
2 responsibilities in exchange for compensation. If, after the
3 assessment, the provider agency determines that the case is
4 substantiated it shall develop a service care plan for the
5 eligible adult and may report its findings at any time during
6 the case to the appropriate law enforcement agency in accord
7 with established law and Department protocols, procedures, and
8 policies. In developing a case plan, the provider agency may
9 consult with any other appropriate provider of services, and
10 such providers shall be immune from civil or criminal
11 liability on account of such acts. The plan shall include
12 alternative suggested or recommended services which are
13 appropriate to the needs of the eligible adult and which
14 involve the least restriction of the eligible adult's
15 activities commensurate with his or her needs. Only those
16 services to which consent is provided in accordance with
17 Section 9 of this Act shall be provided, contingent upon the
18 availability of such services.

19 (b) A provider agency shall refer evidence of crimes
20 against an eligible adult to the appropriate law enforcement
21 agency according to Department policies. A referral to law
22 enforcement may be made at intake or any time during the case.
23 Where a provider agency has reason to believe the death of an
24 eligible adult may be the result of abuse, abandonment, or
25 neglect, the agency shall immediately report the matter to the
26 coroner or medical examiner and shall cooperate fully with any

1 subsequent investigation.

2 (c) If any person other than the alleged victim refuses to
3 allow the provider agency to begin an investigation,
4 interferes with the provider agency's ability to conduct an
5 investigation, or refuses to give access to an eligible adult,
6 the appropriate law enforcement agency must be consulted
7 regarding the investigation.

8 (Source: P.A. 101-496, eff. 1-1-20.)

9 (320 ILCS 20/7.1)

10 Sec. 7.1. Final investigative report. A provider agency
11 shall prepare a final investigative report, upon the
12 completion or closure of an investigation, in all cases of
13 reported abuse, abandonment, neglect, financial exploitation,
14 or self-neglect of an eligible adult, whether or not there is a
15 substantiated finding.

16 (Source: P.A. 98-49, eff. 7-1-13.)

17 (320 ILCS 20/7.5)

18 Sec. 7.5. Registry.

19 (a) To protect individuals receiving in-home and
20 community-based services, the Department on Aging shall
21 establish an Adult Protective Service Registry that will be
22 hosted by the Department of Public Health on its website
23 effective January 1, 2015, and, if practicable, shall propose
24 rules for the Registry by January 1, 2015.

1 (a-5) The Registry shall identify caregivers against whom
2 a verified and substantiated finding was made under this Act
3 of abuse, abandonment, neglect, or financial exploitation.

4 The information in the Registry shall be confidential
5 except as specifically authorized in this Act and shall not be
6 deemed a public record.

7 (a-10) Reporting to the Registry. The Department on Aging
8 shall report to the Registry the identity of the caregiver
9 when a verified and substantiated finding of abuse,
10 abandonment, neglect, or financial exploitation of an eligible
11 adult under this Act is made against a caregiver, and all
12 appeals, challenges, and reviews, if any, have been completed
13 and a finding for placement on the Registry has been sustained
14 or upheld.

15 A finding against a caregiver that is placed in the
16 Registry shall preclude that caregiver from providing direct
17 care, as defined in this Section, in a position with or that is
18 regulated by or paid with public funds from the Department on
19 Aging, the Department of Healthcare and Family Services, the
20 Department of Human Services, or the Department of Public
21 Health or with an entity or provider licensed, certified, or
22 regulated by or paid with public funds from any of these State
23 agencies.

24 (b) Definitions. As used in this Section:

25 "Direct care" includes, but is not limited to, direct
26 access to a person aged 60 or older or to an adult with

1 disabilities aged 18 through 59, his or her living quarters,
2 or his or her personal, financial, or medical records for the
3 purpose of providing nursing care or assistance with feeding,
4 dressing, movement, bathing, toileting, other personal needs
5 and activities of daily living or instrumental activities of
6 daily living, or assistance with financial transactions.

7 "Participant" means an individual who uses the services of
8 an in-home care program funded through the Department on
9 Aging, the Department of Healthcare and Family Services, the
10 Department of Human Services, or the Department of Public
11 Health.

12 (c) Access to and use of the Registry. Access to the
13 Registry shall be limited to the Department on Aging, the
14 Department of Healthcare and Family Services, the Department
15 of Human Services, and the Department of Public Health and
16 providers of direct care as described in subsection (a-10) of
17 this Section. These State agencies and providers shall not
18 hire, compensate either directly or on behalf of a
19 participant, or utilize the services of any person seeking to
20 provide direct care without first conducting an online check
21 of whether the person has been placed on the Registry. These
22 State agencies and providers shall maintain a copy of the
23 results of the online check to demonstrate compliance with
24 this requirement. These State agencies and providers are
25 prohibited from retaining, hiring, compensating either
26 directly or on behalf of a participant, or utilizing the

1 services of a person to provide direct care if the online check
2 of the person reveals a verified and substantiated finding of
3 abuse, abandonment, neglect, or financial exploitation that
4 has been placed on the Registry or when the State agencies or
5 providers otherwise gain knowledge of such placement on the
6 Registry. Failure to comply with this requirement may subject
7 such a provider to corrective action by the appropriate
8 regulatory agency or other lawful remedies provided under the
9 applicable licensure, certification, or regulatory laws and
10 rules.

11 (d) Notice to caregiver. The Department on Aging shall
12 establish rules concerning notice to the caregiver in cases of
13 a verified and substantiated finding of abuse, abandonment,
14 neglect, or financial exploitation against him or her that may
15 make him or her eligible for placement on the Registry.

16 (e) Notification to eligible adults, guardians, or agents.
17 As part of its investigation, the Department on Aging shall
18 notify an eligible adult, or an eligible adult's guardian or
19 agent, that his or her caregiver's name may be placed on the
20 Registry based on a finding as described in subsection (a-10)
21 of this Section.

22 (f) Notification to employer. The Department on Aging
23 shall notify the appropriate State agency or provider of
24 direct care, as described in subsection (a-10), when there is
25 a verified and substantiated finding of abuse, abandonment,
26 neglect, or financial exploitation in a case under this Act

1 that is reported on the Registry and that involves one of its
2 caregivers. That State agency or provider is prohibited from
3 retaining or compensating that individual in a position that
4 involves direct care, and if there is an imminent risk of
5 danger to the victim or an imminent risk of misuse of personal,
6 medical, or financial information, that caregiver shall
7 immediately be barred from providing direct care to the victim
8 pending the outcome of any challenge, appeal, criminal
9 prosecution, or other type of collateral action.

10 (g) Challenges and appeals. The Department on Aging shall
11 establish, by rule, procedures concerning challenges and
12 appeals to placement on the Registry pursuant to legislative
13 intent. The Department shall not make any report to the
14 Registry pending challenges or appeals.

15 (h) Caregiver's rights to collateral action. The
16 Department on Aging shall not make any report to the Registry
17 if a caregiver notifies the Department in writing that he or
18 she is formally challenging an adverse employment action
19 resulting from a verified and substantiated finding of abuse,
20 abandonment, neglect, or financial exploitation by complaint
21 filed with the Illinois Civil Service Commission, or by
22 another means which seeks to enforce the caregiver's rights
23 pursuant to any applicable collective bargaining agreement. If
24 an action taken by an employer against a caregiver as a result
25 of such a finding is overturned through an action filed with
26 the Illinois Civil Service Commission or under any applicable

1 collective bargaining agreement after that caregiver's name
2 has already been sent to the Registry, the caregiver's name
3 shall be removed from the Registry.

4 (i) Removal from Registry. At any time after a report to
5 the Registry, but no more than once in each successive 3-year
6 period thereafter, for a maximum of 3 such requests, a
7 caregiver may request removal of his or her name from the
8 Registry in relationship to a single incident. The caregiver
9 shall bear the burden of establishing, by a preponderance of
10 the evidence, that removal of his or her name from the Registry
11 is in the public interest. Upon receiving such a request, the
12 Department on Aging shall conduct an investigation and
13 consider any evidentiary material provided. The Department
14 shall issue a decision either granting or denying removal to
15 the caregiver and report it to the Registry. The Department
16 shall, by rule, establish standards and a process for
17 requesting the removal of a name from the Registry.

18 (j) Referral of Registry reports to health care
19 facilities. In the event an eligible adult receiving services
20 from a provider agency changes his or her residence from a
21 domestic living situation to that of a health care or long term
22 care facility, the provider agency shall use reasonable
23 efforts to promptly inform the facility and the appropriate
24 Regional Long Term Care Ombudsman about any Registry reports
25 relating to the eligible adult. For purposes of this Section,
26 a health care or long term care facility includes, but is not

1 limited to, any residential facility licensed, certified, or
2 regulated by the Department of Public Health, Healthcare and
3 Family Services, or Human Services.

4 (k) The Department on Aging and its employees and agents
5 shall have immunity, except for intentional willful and wanton
6 misconduct, from any liability, civil, criminal, or otherwise,
7 for reporting information to and maintaining the Registry.

8 (Source: P.A. 98-49, eff. 1-1-14; 98-756, eff. 7-16-14;
9 98-1039, eff. 8-25-14; 99-78, eff. 7-20-15.)

10 (320 ILCS 20/8) (from Ch. 23, par. 6608)

11 Sec. 8. Access to records. All records concerning reports
12 of abuse, abandonment, neglect, financial exploitation, or
13 self-neglect and all records generated as a result of such
14 reports shall be confidential and shall not be disclosed
15 except as specifically authorized by this Act or other
16 applicable law. In accord with established law and Department
17 protocols, procedures, and policies, access to such records,
18 but not access to the identity of the person or persons making
19 a report of alleged abuse, abandonment, neglect, financial
20 exploitation, or self-neglect as contained in such records,
21 shall be provided, upon request, to the following persons and
22 for the following persons:

23 (1) Department staff, provider agency staff, other
24 aging network staff, and regional administrative agency
25 staff, including staff of the Chicago Department on Aging

1 while that agency is designated as a regional
2 administrative agency, in the furtherance of their
3 responsibilities under this Act;

4 (1.5) A representative of the public guardian acting
5 in the course of investigating the appropriateness of
6 guardianship for the eligible adult or while pursuing a
7 petition for guardianship of the eligible adult pursuant
8 to the Probate Act of 1975;

9 (2) A law enforcement agency or State's Attorney's
10 office investigating known or suspected abuse,
11 abandonment, neglect, financial exploitation, or
12 self-neglect. Where a provider agency has reason to
13 believe that the death of an eligible adult may be the
14 result of abuse, abandonment, or neglect, including any
15 reports made after death, the agency shall immediately
16 provide the appropriate law enforcement agency with all
17 records pertaining to the eligible adult;

18 (2.5) A law enforcement agency, fire department
19 agency, or fire protection district having proper
20 jurisdiction pursuant to a written agreement between a
21 provider agency and the law enforcement agency, fire
22 department agency, or fire protection district under which
23 the provider agency may furnish to the law enforcement
24 agency, fire department agency, or fire protection
25 district a list of all eligible adults who may be at
26 imminent risk of abuse, abandonment, neglect, financial

1 exploitation, or self-neglect;

2 (3) A physician who has before him or her or who is
3 involved in the treatment of an eligible adult whom he or
4 she reasonably suspects may be abused, abandoned,
5 neglected, financially exploited, or self-neglected or who
6 has been referred to the Adult Protective Services
7 Program;

8 (4) An eligible adult reported to be abused,
9 abandoned, neglected, financially exploited, or
10 self-neglected, or such adult's authorized guardian or
11 agent, unless such guardian or agent is the abuser or the
12 alleged abuser;

13 (4.5) An executor or administrator of the estate of an
14 eligible adult who is deceased;

15 (5) In cases regarding abuse, abandonment, neglect, or
16 financial exploitation, a court or a guardian ad litem,
17 upon its or his or her finding that access to such records
18 may be necessary for the determination of an issue before
19 the court. However, such access shall be limited to an in
20 camera inspection of the records, unless the court
21 determines that disclosure of the information contained
22 therein is necessary for the resolution of an issue then
23 pending before it;

24 (5.5) In cases regarding self-neglect, a guardian ad
25 litem;

26 (6) A grand jury, upon its determination that access

1 to such records is necessary in the conduct of its
2 official business;

3 (7) Any person authorized by the Director, in writing,
4 for audit or bona fide research purposes;

5 (8) A coroner or medical examiner who has reason to
6 believe that an eligible adult has died as the result of
7 abuse, abandonment, neglect, financial exploitation, or
8 self-neglect. The provider agency shall immediately
9 provide the coroner or medical examiner with all records
10 pertaining to the eligible adult;

11 (8.5) A coroner or medical examiner having proper
12 jurisdiction, pursuant to a written agreement between a
13 provider agency and the coroner or medical examiner, under
14 which the provider agency may furnish to the office of the
15 coroner or medical examiner a list of all eligible adults
16 who may be at imminent risk of death as a result of abuse,
17 abandonment, neglect, financial exploitation, or
18 self-neglect;

19 (9) Department of Financial and Professional
20 Regulation staff and members of the Illinois Medical
21 Disciplinary Board or the Social Work Examining and
22 Disciplinary Board in the course of investigating alleged
23 violations of the Clinical Social Work and Social Work
24 Practice Act by provider agency staff or other licensing
25 bodies at the discretion of the Director of the Department
26 on Aging;

1 (9-a) Department of Healthcare and Family Services
2 staff and provider agency staff when that Department is
3 funding services to the eligible adult, including access
4 to the identity of the eligible adult;

5 (9-b) Department of Human Services staff and provider
6 agency staff when that Department is funding services to
7 the eligible adult or is providing reimbursement for
8 services provided by the abuser or alleged abuser,
9 including access to the identity of the eligible adult;

10 (10) Hearing officers in the course of conducting an
11 administrative hearing under this Act; parties to such
12 hearing shall be entitled to discovery as established by
13 rule;

14 (11) A caregiver who challenges placement on the
15 Registry shall be given the statement of allegations in
16 the abuse report and the substantiation decision in the
17 final investigative report; and

18 (12) The Illinois Guardianship and Advocacy Commission
19 and the agency designated by the Governor under Section 1
20 of the Protection and Advocacy for Persons with
21 Developmental Disabilities Act shall have access, through
22 the Department, to records, including the findings,
23 pertaining to a completed or closed investigation of a
24 report of suspected abuse, abandonment, neglect, financial
25 exploitation, or self-neglect of an eligible adult.

26 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;

1 99-143, eff. 7-27-15; 99-287, eff. 1-1-16; 99-547, eff.
2 7-15-16; 99-642, eff. 7-28-16.)

3 (320 ILCS 20/9) (from Ch. 23, par. 6609)

4 Sec. 9. Authority to consent to services.

5 (a) If an eligible adult consents to an assessment of a
6 reported incident of suspected abuse, abandonment, neglect,
7 financial exploitation, or self-neglect and, following the
8 assessment of such report, consents to services being provided
9 according to the case plan, such services shall be arranged to
10 meet the adult's needs, based upon the availability of
11 resources to provide such services. If an adult withdraws his
12 or her consent for an assessment of the reported incident or
13 withdraws his or her consent for services and refuses to
14 accept such services, the services shall not be provided.

15 (b) If it reasonably appears to the Department or other
16 agency designated under this Act that a person is an eligible
17 adult and lacks the capacity to consent to an assessment of a
18 reported incident of suspected abuse, abandonment, neglect,
19 financial exploitation, or self-neglect or to necessary
20 services, the Department or other agency shall take
21 appropriate action necessary to ameliorate risk to the
22 eligible adult if there is a threat of ongoing harm or another
23 emergency exists. The Department or other agency shall be
24 authorized to seek the appointment of a temporary guardian as
25 provided in Article XIa of the Probate Act of 1975 for the

1 purpose of consenting to an assessment of the reported
2 incident and such services, together with an order for an
3 evaluation of the eligible adult's physical, psychological,
4 and medical condition and decisional capacity.

5 (c) A guardian of the person of an eligible adult may
6 consent to an assessment of the reported incident and to
7 services being provided according to the case plan. If an
8 eligible adult lacks capacity to consent, an agent having
9 authority under a power of attorney may consent to an
10 assessment of the reported incident and to services. If the
11 guardian or agent is the suspected abuser and he or she
12 withdraws consent for the assessment of the reported incident,
13 or refuses to allow services to be provided to the eligible
14 adult, the Department, an agency designated under this Act, or
15 the office of the Attorney General may request a court order
16 seeking appropriate remedies, and may in addition request
17 removal of the guardian and appointment of a successor
18 guardian or request removal of the agent and appointment of a
19 guardian.

20 (d) If an emergency exists and the Department or other
21 agency designated under this Act reasonably believes that a
22 person is an eligible adult and lacks the capacity to consent
23 to necessary services, the Department or other agency may
24 request an ex parte order from the circuit court of the county
25 in which the petitioner or respondent resides or in which the
26 alleged abuse, abandonment, neglect, financial exploitation,

1 or self-neglect occurred, authorizing an assessment of a
2 report of alleged or suspected abuse, abandonment, neglect,
3 financial exploitation, or self-neglect or the provision of
4 necessary services, or both, including relief available under
5 the Illinois Domestic Violence Act of 1986 in accord with
6 established law and Department protocols, procedures, and
7 policies. Petitions filed under this subsection shall be
8 treated as expedited proceedings. When an eligible adult is at
9 risk of serious injury or death and it reasonably appears that
10 the eligible adult lacks capacity to consent to necessary
11 services, the Department or other agency designated under this
12 Act may take action necessary to ameliorate the risk in
13 accordance with administrative rules promulgated by the
14 Department.

15 (d-5) For purposes of this Section, an eligible adult
16 "lacks the capacity to consent" if qualified staff of an
17 agency designated under this Act reasonably determine, in
18 accordance with administrative rules promulgated by the
19 Department, that he or she appears either (i) unable to
20 receive and evaluate information related to the assessment or
21 services or (ii) unable to communicate in any manner decisions
22 related to the assessment of the reported incident or
23 services.

24 (e) Within 15 days after the entry of the ex parte
25 emergency order, the order shall expire, or, if the need for
26 assessment of the reported incident or services continues, the

1 provider agency shall petition for the appointment of a
2 guardian as provided in Article XIa of the Probate Act of 1975
3 for the purpose of consenting to such assessment or services
4 or to protect the eligible adult from further harm.

5 (f) If the court enters an ex parte order under subsection
6 (d) for an assessment of a reported incident of alleged or
7 suspected abuse, abandonment, neglect, financial exploitation,
8 or self-neglect, or for the provision of necessary services in
9 connection with alleged or suspected self-neglect, or for
10 both, the court, as soon as is practicable thereafter, shall
11 appoint a guardian ad litem for the eligible adult who is the
12 subject of the order, for the purpose of reviewing the
13 reasonableness of the order. The guardian ad litem shall
14 review the order and, if the guardian ad litem reasonably
15 believes that the order is unreasonable, the guardian ad litem
16 shall file a petition with the court stating the guardian ad
17 litem's belief and requesting that the order be vacated.

18 (g) In all cases in which there is a substantiated finding
19 of abuse, abandonment, neglect, or financial exploitation by a
20 guardian, the Department shall, within 30 days after the
21 finding, notify the Probate Court with jurisdiction over the
22 guardianship.

23 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14.)

24 (320 ILCS 20/13)

25 Sec. 13. Access.

1 (a) In accord with established law and Department
2 protocols, procedures, and policies, the designated provider
3 agencies shall have access to eligible adults who have been
4 reported or found to be victims of abuse, abandonment,
5 neglect, financial exploitation, or self-neglect in order to
6 assess the validity of the report, assess other needs of the
7 eligible adult, and provide services in accordance with this
8 Act.

9 (a-5) A representative of the Department or a designated
10 provider agency that is actively involved in an abuse,
11 abandonment, neglect, financial exploitation, or self-neglect
12 investigation under this Act shall be allowed access to the
13 financial records, mental and physical health records, and
14 other relevant evaluative records of the eligible adult which
15 are in the possession of any individual, financial
16 institution, health care provider, mental health provider,
17 educational facility, or other facility if necessary to
18 complete the investigation mandated by this Act. The provider
19 or facility shall provide such records to the representative
20 upon receipt of a written request and certification from the
21 Department or designated provider agency that an investigation
22 is being conducted under this Act and the records are
23 pertinent to the investigation.

24 Any records received by such representative, the
25 confidentiality of which is protected by another law or rule,
26 shall be maintained as confidential, except for such use as

1 may be necessary for any administrative or other legal
2 proceeding.

3 (b) Where access to an eligible adult is denied, including
4 the refusal to provide requested records, the Office of the
5 Attorney General, the Department, or the provider agency may
6 petition the court for an order to require appropriate access
7 where:

8 (1) a caregiver or third party has interfered with the
9 assessment or service plan, or

10 (2) the agency has reason to believe that the eligible
11 adult is denying access because of coercion, extortion, or
12 justifiable fear of future abuse, abandonment, neglect, or
13 financial exploitation.

14 (c) The petition for an order requiring appropriate access
15 shall be afforded an expedited hearing in the circuit court.

16 (d) If the provider agency has substantiated financial
17 exploitation against an eligible adult, and has documented a
18 reasonable belief that the eligible adult will be irreparably
19 harmed as a result of the financial exploitation, the Office
20 of the Attorney General, the Department, or the provider
21 agency may petition for an order freezing the assets of the
22 eligible adult. The petition shall be filed in the county or
23 counties in which the assets are located. The court's order
24 shall prohibit the sale, gifting, transfer, or wasting of the
25 assets of the eligible adult, both real and personal, owned
26 by, or vested in, the eligible adult, without the express

1 permission of the court. The petition to freeze the assets of
2 the eligible adult shall be afforded an expedited hearing in
3 the circuit court.

4 (Source: P.A. 98-1039, eff. 8-25-14.)

5 (320 ILCS 20/15)

6 Sec. 15. Fatality review teams.

7 (a) State policy.

8 (1) Both the State and the community maintain a
9 commitment to preventing the abuse, abandonment, neglect,
10 and financial exploitation of at-risk adults. This
11 includes a charge to bring perpetrators of crimes against
12 at-risk adults to justice and prevent untimely deaths in
13 the community.

14 (2) When an at-risk adult dies, the response to the
15 death by the community, law enforcement, and the State
16 must include an accurate and complete determination of the
17 cause of death, and the development and implementation of
18 measures to prevent future deaths from similar causes.

19 (3) Multidisciplinary and multi-agency reviews of
20 deaths can assist the State and counties in developing a
21 greater understanding of the incidence and causes of
22 premature deaths and the methods for preventing those
23 deaths, improving methods for investigating deaths, and
24 identifying gaps in services to at-risk adults.

25 (4) Access to information regarding the deceased

1 person and his or her family by multidisciplinary and
2 multi-agency fatality review teams is necessary in order
3 to fulfill their purposes and duties.

4 (a-5) Definitions. As used in this Section:

5 "Advisory Council" means the Illinois Fatality Review
6 Team Advisory Council.

7 "Review Team" means a regional interagency fatality
8 review team.

9 (b) The Director, in consultation with the Advisory
10 Council, law enforcement, and other professionals who work in
11 the fields of investigating, treating, or preventing abuse,
12 abandonment, or neglect of at-risk adults, shall appoint
13 members to a minimum of one review team in each of the
14 Department's planning and service areas. Each member of a
15 review team shall be appointed for a 2-year term and shall be
16 eligible for reappointment upon the expiration of the term. A
17 review team's purpose in conducting review of at-risk adult
18 deaths is: (i) to assist local agencies in identifying and
19 reviewing suspicious deaths of adult victims of alleged,
20 suspected, or substantiated abuse, abandonment, or neglect in
21 domestic living situations; (ii) to facilitate communications
22 between officials responsible for autopsies and inquests and
23 persons involved in reporting or investigating alleged or
24 suspected cases of abuse, abandonment, neglect, or financial
25 exploitation of at-risk adults and persons involved in
26 providing services to at-risk adults; (iii) to evaluate means

1 by which the death might have been prevented; and (iv) to
2 report its findings to the appropriate agencies and the
3 Advisory Council and make recommendations that may help to
4 reduce the number of at-risk adult deaths caused by abuse,
5 abandonment, and neglect and that may help to improve the
6 investigations of deaths of at-risk adults and increase
7 prosecutions, if appropriate.

8 (b-5) Each such team shall be composed of representatives
9 of entities and individuals including, but not limited to:

10 (1) the Department on Aging;

11 (2) coroners or medical examiners (or both);

12 (3) State's Attorneys;

13 (4) local police departments;

14 (5) forensic units;

15 (6) local health departments;

16 (7) a social service or health care agency that
17 provides services to persons with mental illness, in a
18 program whose accreditation to provide such services is
19 recognized by the Division of Mental Health within the
20 Department of Human Services;

21 (8) a social service or health care agency that
22 provides services to persons with developmental
23 disabilities, in a program whose accreditation to provide
24 such services is recognized by the Division of
25 Developmental Disabilities within the Department of Human
26 Services;

1 (9) a local hospital, trauma center, or provider of
2 emergency medicine;

3 (10) providers of services for eligible adults in
4 domestic living situations; and

5 (11) a physician, psychiatrist, or other health care
6 provider knowledgeable about abuse, abandonment, and
7 neglect of at-risk adults.

8 (c) A review team shall review cases of deaths of at-risk
9 adults occurring in its planning and service area (i)
10 involving blunt force trauma or an undetermined manner or
11 suspicious cause of death; (ii) if requested by the deceased's
12 attending physician or an emergency room physician; (iii) upon
13 referral by a health care provider; (iv) upon referral by a
14 coroner or medical examiner; (v) constituting an open or
15 closed case from an adult protective services agency, law
16 enforcement agency, State's Attorney's office, or the
17 Department of Human Services' Office of the Inspector General
18 that involves alleged or suspected abuse, abandonment,
19 neglect, or financial exploitation; or (vi) upon referral by a
20 law enforcement agency or State's Attorney's office. If such a
21 death occurs in a planning and service area where a review team
22 has not yet been established, the Director shall request that
23 the Advisory Council or another review team review that death.
24 A team may also review deaths of at-risk adults if the alleged
25 abuse, abandonment, or neglect occurred while the person was
26 residing in a domestic living situation.

1 A review team shall meet not less than 4 times a year to
2 discuss cases for its possible review. Each review team, with
3 the advice and consent of the Department, shall establish
4 criteria to be used in discussing cases of alleged, suspected,
5 or substantiated abuse, abandonment, or neglect for review and
6 shall conduct its activities in accordance with any applicable
7 policies and procedures established by the Department.

8 (c-5) The Illinois Fatality Review Team Advisory Council,
9 consisting of one member from each review team in Illinois,
10 shall be the coordinating and oversight body for review teams
11 and activities in Illinois. The Director may appoint to the
12 Advisory Council any ex-officio members deemed necessary.
13 Persons with expertise needed by the Advisory Council may be
14 invited to meetings. The Advisory Council must select from its
15 members a chairperson and a vice-chairperson, each to serve a
16 2-year term. The chairperson or vice-chairperson may be
17 selected to serve additional, subsequent terms. The Advisory
18 Council must meet at least 4 times during each calendar year.

19 The Department may provide or arrange for the staff
20 support necessary for the Advisory Council to carry out its
21 duties. The Director, in cooperation and consultation with the
22 Advisory Council, shall appoint, reappoint, and remove review
23 team members.

24 The Advisory Council has, but is not limited to, the
25 following duties:

- 26 (1) To serve as the voice of review teams in Illinois.

1 (2) To oversee the review teams in order to ensure
2 that the review teams' work is coordinated and in
3 compliance with State statutes and the operating protocol.

4 (3) To ensure that the data, results, findings, and
5 recommendations of the review teams are adequately used in
6 a timely manner to make any necessary changes to the
7 policies, procedures, and State statutes in order to
8 protect at-risk adults.

9 (4) To collaborate with the Department in order to
10 develop any legislation needed to prevent unnecessary
11 deaths of at-risk adults.

12 (5) To ensure that the review teams' review processes
13 are standardized in order to convey data, findings, and
14 recommendations in a usable format.

15 (6) To serve as a link with review teams throughout
16 the country and to participate in national review team
17 activities.

18 (7) To provide the review teams with the most current
19 information and practices concerning at-risk adult death
20 review and related topics.

21 (8) To perform any other functions necessary to
22 enhance the capability of the review teams to reduce and
23 prevent at-risk adult fatalities.

24 The Advisory Council may prepare an annual report, in
25 consultation with the Department, using aggregate data
26 gathered by review teams and using the review teams'

1 recommendations to develop education, prevention, prosecution,
2 or other strategies designed to improve the coordination of
3 services for at-risk adults and their families.

4 In any instance where a review team does not operate in
5 accordance with established protocol, the Director, in
6 consultation and cooperation with the Advisory Council, must
7 take any necessary actions to bring the review team into
8 compliance with the protocol.

9 (d) Any document or oral or written communication shared
10 within or produced by the review team relating to a case
11 discussed or reviewed by the review team is confidential and
12 is not admissible as evidence in any civil or criminal
13 proceeding, except for use by a State's Attorney's office in
14 prosecuting a criminal case against a caregiver. Those records
15 and information are, however, subject to discovery or
16 subpoena, and are admissible as evidence, to the extent they
17 are otherwise available to the public.

18 Any document or oral or written communication provided to
19 a review team by an individual or entity, and created by that
20 individual or entity solely for the use of the review team, is
21 confidential, is not subject to disclosure to or discoverable
22 by another party, and is not admissible as evidence in any
23 civil or criminal proceeding, except for use by a State's
24 Attorney's office in prosecuting a criminal case against a
25 caregiver. Those records and information are, however, subject
26 to discovery or subpoena, and are admissible as evidence, to

1 the extent they are otherwise available to the public.

2 Each entity or individual represented on the fatality
3 review team may share with other members of the team
4 information in the entity's or individual's possession
5 concerning the decedent who is the subject of the review or
6 concerning any person who was in contact with the decedent, as
7 well as any other information deemed by the entity or
8 individual to be pertinent to the review. Any such information
9 shared by an entity or individual with other members of the
10 review team is confidential. The intent of this paragraph is
11 to permit the disclosure to members of the review team of any
12 information deemed confidential or privileged or prohibited
13 from disclosure by any other provision of law. Release of
14 confidential communication between domestic violence advocates
15 and a domestic violence victim shall follow subsection (d) of
16 Section 227 of the Illinois Domestic Violence Act of 1986
17 which allows for the waiver of privilege afforded to
18 guardians, executors, or administrators of the estate of the
19 domestic violence victim. This provision relating to the
20 release of confidential communication between domestic
21 violence advocates and a domestic violence victim shall
22 exclude adult protective service providers.

23 A coroner's or medical examiner's office may share with
24 the review team medical records that have been made available
25 to the coroner's or medical examiner's office in connection
26 with that office's investigation of a death.

1 Members of a review team and the Advisory Council are not
2 subject to examination, in any civil or criminal proceeding,
3 concerning information presented to members of the review team
4 or the Advisory Council or opinions formed by members of the
5 review team or the Advisory Council based on that information.
6 A person may, however, be examined concerning information
7 provided to a review team or the Advisory Council.

8 (d-5) Meetings of the review teams and the Advisory
9 Council may be closed to the public under the Open Meetings
10 Act. Records and information provided to a review team and the
11 Advisory Council, and records maintained by a team or the
12 Advisory Council, are exempt from release under the Freedom of
13 Information Act.

14 (e) A review team's recommendation in relation to a case
15 discussed or reviewed by the review team, including, but not
16 limited to, a recommendation concerning an investigation or
17 prosecution, may be disclosed by the review team upon the
18 completion of its review and at the discretion of a majority of
19 its members who reviewed the case.

20 (e-5) The State shall indemnify and hold harmless members
21 of a review team and the Advisory Council for all their acts,
22 omissions, decisions, or other conduct arising out of the
23 scope of their service on the review team or Advisory Council,
24 except those involving willful or wanton misconduct. The
25 method of providing indemnification shall be as provided in
26 the State Employee Indemnification Act.

1 (f) The Department, in consultation with coroners, medical
2 examiners, and law enforcement agencies, shall use aggregate
3 data gathered by and recommendations from the Advisory Council
4 and the review teams to create an annual report and may use
5 those data and recommendations to develop education,
6 prevention, prosecution, or other strategies designed to
7 improve the coordination of services for at-risk adults and
8 their families. The Department or other State or county
9 agency, in consultation with coroners, medical examiners, and
10 law enforcement agencies, also may use aggregate data gathered
11 by the review teams to create a database of at-risk
12 individuals.

13 (g) The Department shall adopt such rules and regulations
14 as it deems necessary to implement this Section.

15 (Source: P.A. 98-49, eff. 7-1-13; 98-1039, eff. 8-25-14;
16 99-78, eff. 7-20-15; 99-530, eff. 1-1-17.)

17 Section 10. The Criminal Code of 2012 is amended by
18 changing Sections 3-5 and 17-56 as follows:

19 (720 ILCS 5/3-5) (from Ch. 38, par. 3-5)

20 Sec. 3-5. General limitations.

21 (a) A prosecution for: (1) first degree murder, attempt to
22 commit first degree murder, second degree murder, involuntary
23 manslaughter, reckless homicide, a violation of subparagraph
24 (F) of paragraph (1) of subsection (d) of Section 11-501 of the

1 Illinois Vehicle Code for the offense of aggravated driving
2 under the influence of alcohol, other drug or drugs, or
3 intoxicating compound or compounds, or any combination thereof
4 when the violation was a proximate cause of a death, leaving
5 the scene of a motor vehicle accident involving death or
6 personal injuries under Section 11-401 of the Illinois Vehicle
7 Code, failing to give information and render aid under Section
8 11-403 of the Illinois Vehicle Code, concealment of homicidal
9 death, treason, arson, residential arson, aggravated arson,
10 forgery, child pornography under paragraph (1) of subsection
11 (a) of Section 11-20.1, or aggravated child pornography under
12 paragraph (1) of subsection (a) of Section 11-20.1B, or (2)
13 any offense involving sexual conduct or sexual penetration, as
14 defined by Section 11-0.1 of this Code may be commenced at any
15 time.

16 (a-5) A prosecution for theft of property exceeding
17 \$100,000 in value under Section 16-1, identity theft under
18 subsection (a) of Section 16-30, aggravated identity theft
19 under subsection (b) of Section 16-30, financial exploitation
20 of an elderly person or a person with a disability under
21 Section 17-56; theft by deception of a victim 60 years of age
22 or older or a person with a disability under Section 16-1; or
23 any offense set forth in Article 16H or Section 17-10.6 may be
24 commenced within 7 years of the last act committed in
25 furtherance of the crime.

26 (b) Unless the statute describing the offense provides

1 otherwise, or the period of limitation is extended by Section
2 3-6, a prosecution for any offense not designated in
3 subsection (a) or (a-5) must be commenced within 3 years after
4 the commission of the offense if it is a felony, or within one
5 year and 6 months after its commission if it is a misdemeanor.

6 (Source: P.A. 100-149, eff. 1-1-18; 100-863, eff. 8-14-18;
7 101-130, eff. 1-1-20.)

8 (720 ILCS 5/17-56) (was 720 ILCS 5/16-1.3)

9 Sec. 17-56. Financial exploitation of an elderly person or
10 a person with a disability.

11 (a) A person commits financial exploitation of an elderly
12 person or a person with a disability when he or she stands in a
13 position of trust or confidence with the elderly person or a
14 person with a disability and he or she knowingly:

15 (1) by deception or intimidation obtains control over
16 the property of an elderly person or a person with a
17 disability; or

18 (2) illegally uses the assets or resources of an
19 elderly person or a person with a disability.

20 (b) Sentence. Financial exploitation of an elderly person
21 or a person with a disability is: (1) a Class 4 felony if the
22 value of the property is \$300 or less, (2) a Class 3 felony if
23 the value of the property is more than \$300 but less than
24 \$5,000, (3) a Class 2 felony if the value of the property is
25 \$5,000 or more but less than \$50,000, and (4) a Class 1 felony

1 if the value of the property is \$50,000 or more or if the
2 elderly person is over 70 years of age and the value of the
3 property is \$15,000 or more or if the elderly person is 80
4 years of age or older and the value of the property is \$5,000
5 or more.

6 (c) For purposes of this Section:

7 (1) "Elderly person" means a person 60 years of age or
8 older.

9 (2) "Person with a disability" means a person who
10 suffers from a physical or mental impairment resulting
11 from disease, injury, functional disorder or congenital
12 condition that impairs the individual's mental or physical
13 ability to independently manage his or her property or
14 financial resources, or both.

15 (3) "Intimidation" means the communication to an
16 elderly person or a person with a disability that he or she
17 shall be deprived of food and nutrition, shelter,
18 prescribed medication or medical care and treatment or
19 conduct as provided in Section 12-6 of this Code.

20 (4) "Deception" means, in addition to its meaning as
21 defined in Section 15-4 of this Code, a misrepresentation
22 or concealment of material fact relating to the terms of a
23 contract or agreement entered into with the elderly person
24 or person with a disability or to the existing or
25 pre-existing condition of any of the property involved in
26 such contract or agreement; or the use or employment of

1 any misrepresentation, false pretense or false promise in
2 order to induce, encourage or solicit the elderly person
3 or person with a disability to enter into a contract or
4 agreement.

5 The illegal use of the assets or resources of an elderly
6 person or a person with a disability includes, but is not
7 limited to, the misappropriation of those assets or resources
8 by undue influence, breach of a fiduciary relationship, fraud,
9 deception, extortion, or use of the assets or resources
10 contrary to law.

11 A person stands in a position of trust and confidence with
12 an elderly person or person with a disability when he (i) is a
13 parent, spouse, adult child or other relative by blood or
14 marriage of the elderly person or person with a disability,
15 (ii) is a joint tenant or tenant in common with the elderly
16 person or person with a disability, (iii) has a legal or
17 fiduciary relationship with the elderly person or person with
18 a disability, (iv) is a financial planning or investment
19 professional, ~~or~~ (v) is a paid or unpaid caregiver for the
20 elderly person or person with a disability, or (vi) is a friend
21 or acquaintance in a position of trust.

22 (d) Limitations. Nothing in this Section shall be
23 construed to limit the remedies available to the victim under
24 the Illinois Domestic Violence Act of 1986.

25 (e) Good faith efforts. Nothing in this Section shall be
26 construed to impose criminal liability on a person who has

1 made a good faith effort to assist the elderly person or person
2 with a disability in the management of his or her property, but
3 through no fault of his or her own has been unable to provide
4 such assistance.

5 (f) Not a defense. It shall not be a defense to financial
6 exploitation of an elderly person or person with a disability
7 that the accused reasonably believed that the victim was not
8 an elderly person or person with a disability. Consent is not a
9 defense to financial exploitation of an elderly person or a
10 person with a disability if the accused knew or had reason to
11 know that the elderly person or a person with a disability
12 lacked capacity to consent.

13 (g) Civil Liability. A civil cause of action exists for
14 financial exploitation of an elderly person or a person with a
15 disability as described in subsection (a) of this Section. A
16 person against whom a civil judgment has been entered for
17 financial exploitation of an elderly person or person with a
18 disability shall be liable to the victim or to the estate of
19 the victim in damages of treble the amount of the value of the
20 property obtained, plus reasonable attorney fees and court
21 costs. In a civil action under this subsection, the burden of
22 proof that the defendant committed financial exploitation of
23 an elderly person or a person with a disability as described in
24 subsection (a) of this Section shall be by a preponderance of
25 the evidence. This subsection shall be operative whether or
26 not the defendant has been charged or convicted of the

1 criminal offense as described in subsection (a) of this
2 Section. This subsection (g) shall not limit or affect the
3 right of any person to bring any cause of action or seek any
4 remedy available under the common law, or other applicable
5 law, arising out of the financial exploitation of an elderly
6 person or a person with a disability.

7 (h) If a person is charged with financial exploitation of
8 an elderly person or a person with a disability that involves
9 the taking or loss of property valued at more than \$5,000, a
10 prosecuting attorney may file a petition with the circuit
11 court of the county in which the defendant has been charged to
12 freeze the assets of the defendant in an amount equal to but
13 not greater than the alleged value of lost or stolen property
14 in the defendant's pending criminal proceeding for purposes of
15 restitution to the victim. The burden of proof required to
16 freeze the defendant's assets shall be by a preponderance of
17 the evidence.

18 (Source: P.A. 101-394, eff. 1-1-20.)

19 Section 15. The Home Repair Fraud Act is amended by
20 changing Section 5 as follows:

21 (815 ILCS 515/5) (from Ch. 121 1/2, par. 1605)

22 Sec. 5. Aggravated Home Repair Fraud. A person commits the
23 offense of aggravated home repair fraud when he commits home
24 repair fraud:

1 (i) against an elderly person or a person with a
2 disability as defined in Section 17-56 of the Criminal
3 Code of 2012; or

4 (ii) in connection with a home repair project intended
5 to assist a person with a disability.

6 A person commits aggravated home repair fraud when he or
7 she misrepresents a material fact to an elderly person or
8 person with a disability relating to the terms of a contract or
9 agreement or a preexisting or existing condition of any
10 portion of a property involved, or creates or confirms an
11 impression which is false and which he or she does not believe
12 to be true, or promises performance which he or she does not
13 intend to perform or knows will not be performed or completed
14 at any time during the performance of the service.

15 (a) Aggravated violation of paragraphs (1) or (2) of
16 subsection (a) of Section 3 of this Act shall be a Class 2
17 felony when the amount of the contract or agreement is more
18 than \$500, a Class 3 felony when the amount of the contract or
19 agreement is \$500 or less, and a Class 2 felony for a second or
20 subsequent offense when the amount of the contract or
21 agreement is \$500 or less. If 2 or more contracts or agreements
22 for home repair exceed an aggregate amount of \$500 or more and
23 such contracts or agreements are entered into with the same
24 victim by one or more of the defendants as part of or in
25 furtherance of a common fraudulent scheme, design or
26 intention, the violation shall be a Class 2 felony.

1 (b) Aggravated violation of paragraph (3) of subsection
2 (a) of Section 3 of this Act shall be a Class 2 felony when the
3 amount of the contract or agreement is more than \$5,000 and a
4 Class 3 felony when the amount of the contract or agreement is
5 \$5,000 or less.

6 (c) Aggravated violation of paragraph (4) of subsection
7 (a) of Section 3 of this Act shall be a Class 3 felony when the
8 amount of the contract or agreement is more than \$500, a Class
9 4 felony when the amount of the contract or agreement is \$500
10 or less and a Class 3 felony for a second or subsequent offense
11 when the amount of the contract or agreement is \$500 or less.

12 (d) Aggravated violation of paragraphs (1) or (2) of
13 subsection (b) of Section 3 of this Act shall be a Class 3
14 felony.

15 (e) If a person commits aggravated home repair fraud, then
16 any State or local license or permit held by that person that
17 relates to the business of home repair may be appropriately
18 suspended or revoked by the issuing authority, commensurate
19 with the severity of the offense.

20 (f) A defense to aggravated home repair fraud does not
21 exist merely because the accused reasonably believed the
22 victim to be a person less than 60 years of age.

23 (Source: P.A. 99-143, eff. 7-27-15.)"